

030904

16523 U.S. PTO

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.	<b>B00662/70046</b>
	First Named Inventor or Application Identifier	
	<b>David ALSOP</b>	
	Express Mail Label No.	<b>EV 292462320 US</b>
	Date of Deposit	<b>March 9, 2004</b>

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10/796908

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<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents	<b>ADDRESS</b> Box Patent Application TO: Commissioner for Patents Washington, DC 20231
1. <input type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R, in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total pages 25]  18 - pages description 1 - pages abstract 6 - pages claims 50 - Total claims	a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total sheets 11]  <input type="checkbox"/> Informal <input checked="" type="checkbox"/> Formal [Total drawings 1a-11]	<b>ACCOMPANYING APPLICATION PARTS</b>
5. <input checked="" type="checkbox"/> Oath or Declaration [Total pages 3] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> Assignment Papers/cover sheet & documents(s)
If 5b is checked the entire disclosure of prior applications, Serial No. 10/121,963 from which an oath or declaration is supplied, is considered as part of the disclosure of the accompanying application as is hereby incorporated by reference therein. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
6. <input checked="" type="checkbox"/> Application Data Sheet, See 37 CFR 1.76	11. <input type="checkbox"/> English Translation of Document (if applicable)
	12. <input checked="" type="checkbox"/> Information Disclosure Statement PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	13. <input checked="" type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	16. <input type="checkbox"/> Request and Certification Under 35 U.S.C. §122(b)(2)(B)(ii)
	17. <input type="checkbox"/> Other: _____ _____ _____
<b>17a. DO NOT CHARGE ANY FILING FEES OR ADDITIONAL FEES TO OUR DEPOSIT ACCOUNT</b>	

**18. NOTE TO PRACTITIONERS:** If a CONTINUING APPLICATION, supply the requisite priority or continuity information in (1) the body of the application, or in a preliminary amendment, and (2) in an Application Data Sheet under 37 CFR 1.76.

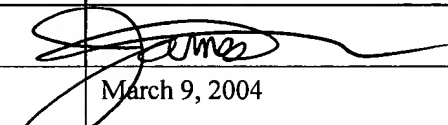
**19. CORRESPONDENCE ADDRESS**

*Correspondence address below*

**CUSTOMER NUMBER:**

**23628**

**OR (do NOT use both)**

ATTORNEY'S NAME					
FIRM NAME					
ADDRESS					
CITY		STATE		ZIP	
COUNTRY		TELEPHONE		FAX	
<b>20. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>					
NAME	James H. Morris, Reg. No. 34,681				
SIGNATURE					
DATE	March 9, 2004				